

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|----------------------------------|-----------|------------|-----------------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | <i>MW</i> | <i>50</i> | <i>06-19-01</i> |
| FORMALITY REVIEW | <i>AM</i> | <i>917</i> | <i>06-22-01</i> |
| RESPONSE FORMALITY REVIEW | | | <i>08-09-01</i> |
| | | | |
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INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral).... Canceled A Appeal
 ÷ Restricted 0 Objected

| Claim | Date |
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| Final | |
| Original | |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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